(N	rio 3160~5 ovember 1983) ormerly 9=331) DEPARTMEN OF T BUREAU OF LAND M	HE INTENIC	R Perse side)	Budget Burger Surface Au 5. LEASE DESIGNA NM 1531	reau No. 100 gast 31, 190 Tion and 82 0	ช5	
	SUNDRY NOTICES AND (Do not use this form for proposals to drift or to Use "APPLICATION FOR PERM	REPORTS O	NWELLS CO PERM	6 IF INDIAN, ALL	OTTKE OR TRI	BE NAME	
Ĩ.	UIL [T] GAS [V]			7. UNIT AGREEME.	7. UNIT AGREEMENT NAME		
2.	VELL WELL OTHER			The second secon	Paduca Unit 8. FARM OR LEASE NAME		
3 .	Yates Petroleum Corporation ADDRESS OF OPERATOR	Paduca Un	Paduca Unit				
	105 South 4th St., Artesia, NM	3	3 10. FIELD AND POOL OR WILDCAT				
7.	OCATION OF WELL (Report location clearly and in accordance with any State requirements.* ec also space 17 below) t surface			Wildcat			
	1980' FSL & 660' FEL	11. SEC., T., B., M.	11. SEC., T., E., M., OR BLK. AND SURVEY OR ARMA				
	#30-025-30387 15 ELEVATIONS 6		Unit I, Sec. 23-T25S-R32E 12. COUNTY OR PARISH 13. STATE Lea NM				
16	Check Appropriate Box	To Indicate Na	ture of Notice, Report, o	or Other Data			
					ENT REPORT OF:		
	TEST WATER SHUT-OFF PULL OR ALTER CAS	SING	WATER SHUT-OFF	REPAIR	ING WELL		
	FRACTURE TREAT SHOOT OR ACIDIZE SHOOT OR ACIDIZE ABANDON*	TE .	FRACTUBE TREATMENT SHOOTING OR ACIDIZING		NG CASING		
	REPAIR WELL CHANGE PLANS	(Other) Spud with		h rotary tool	rotary tool rig.		
17.	(Other) (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) DESCRIBE PROPOSED OR COMPLETES OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per nent to this work.)					rting any nes perti-	
	8-24-88. Reached TD of 272' dr 8-25-88. Building location. 9-1-88. Moved in rotary rig. Notified Jack Johnson, BLM, Hob	Resumed dri		5—88 with rota	ry tools		
				>:<	SEP		
				5 35	, -0	ZJ	
					1~	ш	
		,			ယ ေ	CEIVE	
					<u>ت</u> ت	Ē	
					-	O	
				<i>7</i> 77	f 83		
	I hereby certify that the foregoing is true and correct	TITLE Pro	luction Supervisor	DATE 9-8	3–88		
112	(This space for Federal or State office use)			DATE		7.6.4 by . 10. 11. 10.00	
	APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	<u>A</u>	CCEPTED FOR F	PTED FOR RECORD		
	THE PARTY OF METADOTAL, IF ANT.			SEP 2 2 19	SEP 2.2.1988		
	*Se	e Instructions or		SI Adisrati mena	JS AADVIDA		